

Newborn Skin Rashes and Birthmarks

After the first bath your newborn will normally have a ruddy complexion due to the extra high count of red blood cells. He can quickly change to a pale- or mottled-blue color if he becomes cold, so keep him warm. During the second week of life, your baby's skin will normally become dry and flaky. Many babies also get rashes or have birthmarks. In this handout, seven kinds of rashes and birthmarks are covered.

1. **Acne of newborn**

More than 30% of newborns develop acne of the face: mainly small, red bumps. This neonatal acne begins at 3 to 4 weeks of age and lasts until 4 to 6 months of age. The cause appears to be the transfer of maternal androgens (hormones) just prior to birth. Since it is temporary, no treatment is necessary. Baby oil or ointments will just make it worse.

2. **Drooling rash**

Most babies have a rash on the chin or cheeks that comes and goes. Often, this rash is caused by contact with food and acid that have been spit up from the stomach. Rinse your baby's face with water after all feedings or spitting up.

Other temporary rashes on the face are heat rashes in areas held against the mother's skin during nursing (especially in the summertime). Change your baby's position more frequently and put a cool washcloth on the area that has a rash.

3. **Erythema toxicum**

More than 50% of babies get a rash called erythema toxicum on the second or third day of life. The rash is composed of 1/2 inch to 1 inch-size red blotches, each with a little white "pimple" in the center. They look like insect bites. They are numerous, keep recurring for a week, and can be anywhere on the body (except palms and soles). The cause of this rash is unknown, but it is not an infection and it is harmless. The rash usually disappears by the time an infant is 2 weeks old, but sometimes not until a child is 4 weeks old. No treatment is helpful or necessary.

By contrast, herpes simplex is a serious newborn rash that should not be mistaken for erythema toxicum. It consists of several water blisters or pimples grouped in a cluster. They look like the cold sores (fever blisters) that adults get on their lip. If you think your newborn has herpes, call your child's healthcare provider immediately.

4. **Forceps or birth canal injury**

If your baby's delivery was difficult, a forceps may have been used to help him through the birth canal. The pressure of the forceps on the skin can leave bruises or scrapes or can even damage fat tissue anywhere on the head or face.

Pressure from the birth canal can damage the skin overlying bony prominences (such as the sides of the skull) even without a forceps delivery. Fetal monitors can also cause scrapes and scabs on the scalp.

You will notice the bruises and scrapes 1 or 2 days after birth. They will disappear in 1 to 2 weeks.

Injury to fat tissue won't be apparent until the fifth or sixth day after birth. A thickened lump of skin with an overlying scab is what you usually see. This may take 3 or 4 weeks to heal. For any breaks in the skin, apply an antibiotic ointment (OTC) 3 times per day until healed. If it becomes tender to the touch or soft in the center or shows other signs of infection, call your healthcare provider.

5. **Milia**

Milia are tiny white bumps that occur on the faces of 40% of newborn babies. The nose and cheeks are most often involved, but milia are also seen on the forehead and chin. Although they look like pimples, they are smaller and not infected. They are blocked-off skin pores and will open up and disappear by 1 to 2 months of age. Do not apply ointments or creams to them.

Any true blisters (little bumps containing clear fluid) or pimples (little bumps containing pus) that occur during the first month of life (especially on the scalp) must be examined and diagnosed quickly. If they are caused by the herpesvirus, they must be treated right away. If you suspect blisters or pimples, call your child's healthcare provider immediately.

6. **Mongolian spots**

A Mongolian spot is a bluish-gray, flat birthmark that is found in more than 90% of American Indian, Asian, Hispanic, and black babies. They occur most commonly over the back and buttocks, although they can be present on any part of the body. They vary greatly in size and shape. Most fade away by 2 or 3 years of age, although a trace may persist into adult life.

7. **Stork bites (pink birthmarks)**

Flat pink birthmarks (also called capillary hemangiomas) occur over the bridge of the nose, the eyelids, or the back of the neck in more than 50% of newborns. Most of these spots fade and disappear, but some can persist into adult life. Those on the forehead that run from the bridge of the nose up to the hairline usually persist into adult life. Laser treatment during infancy should be considered for these.

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